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APPLICANTS Bansil Lal, Mumbai, INDIA; Kalpana Joshi, Thane, INDIA; Sanjeev Kulkarni, Mumbai, INDIA; Malcolm Mascarenhas, Mumbai, INDIA; Shrikant Kamble, Mumbai, INDIA; Maggie Joyce Rathos, Thane, INDIA; Rajendrakumar Joshi, Mumbai, INDIA;				
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Verified and Acknowledged Examiner's Signature _____ Initials _____		INDEPENDENT CLAIMS 7		
ADDRESS FROMMER LAWRENCE & HAUG LLP 745 Fifth Avenue New York, NY 10151				
TITLE INHIBITORS OF CYCLIN-DEPENDENT KINASES AND THEIR USE				
FILING FEE RECEIVED 1320	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	